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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/606,909	06/29/2000	Ronald J. Pettis	11219-008-999	7814
20583	7590	05/17/2012	EXAMINER	
JONES DAY 222 EAST 41ST ST NEW YORK, NY 10017			GRAY, PHILLIP A	
ART UNIT	PAPER NUMBER			
		3767		
MAIL DATE	DELIVERY MODE			
05/17/2012	PAPER			

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.




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**UNITED STATES PATENT AND TRADEMARK OFFICE**


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Board of Patent Appeals and Interferences

JONES DAY  
222 EAST 41ST ST  
NEW YORK, NY10017

Appeal No: 2010-006501  
 Appellant: Ronald J. Pettis, et al.  
 Application No: 09/606,909  
 Hearing Room: A  
 Hearing Docket: B  
 Hearing Date: Tuesday, October 16, 2012  
 Hearing Time: 01:00 PM  
 Location: Madison Building - East Wing  
 600 Dulany Street, 9th Floor  
 Alexandria, Virginia 22313-1450

**NOTICE OF HEARING**  
**CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

**CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.** This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

BPAI HEARINGS FAX No: (571) 273-0299

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In all communications relating to this appeal, please identify the appeal by its number.

**CHECK ONE:**  **HEARING ATTENDANCE CONFIRMED**  **HEARING ATTENDANCE WAIVED**

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel: \_\_\_\_\_  
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